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**Campaign Finance
Appointment of Treasurer or
Candidate Committee Form
For Candidate For State Office**

Governmental Ethics Commission
109 W. 9th, Suite 504
Topeka, KS 66612
Phone (785) 296-4219
Fax (785) 296-2548
www.kansas.gov/ethics

This is an (Check one) ☐ Initial Appointment ☒ Amended Statement

Candidate Candidate Name: **Joy Koesten**

Address: **3310 W 137th Street**

Address2:

City: **Leawood** Zip: **66224**

Home Phone: **(913) 972-7883** Business Phone: **(913) 972-7883** Cell Phone: **(913) 972-7883**

County: **Johnson** Email Address: **jkoesten@gmail.com**

Office Sought: **State Representative** District No.: **28**

Treasurer Date Appointed: **12/28/2015**

Treasurer Name: **Robert D Regnier**

Address: **3400 W 119th St**

Address2:

City: **Leawood** State: **KS** Zip: **66209**

Home Telephone: Business Phone: **(913) 338-1000** Cell Phone: **(913) 269-4568**

Email Address: **bregnier@bankbv.com**

Candidate Date Appointed:

Committee Chairperson's Name:

Address:

Address2:

City: State: Zip:

Home Telephone: Business Phone: Cell Phone:

Email Address:

Date Appointed:

Treasurer's Name:

Address:

Address2:

City: State: Zip:

Home Telephone: Business Phone: Cell Phone:

Email Address:

I declare that this statement has been examined by me and to the best of my knowledge and belief is true, correct and complete. I understand that the intentional failure to file this document or intentionally filing a false document is a class A misdemeanor.

Executed on:

Date: **12/30/2016 1:47:37 PM** Signature of Candidate: **Joy Koesten**

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